PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 200Ú

Application or Docket Number 09/693/35

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16				F	RATE	FEE	n (RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	ASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	/ (p minus 20=		*			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	a minus 3 =		r ·			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL	355°	OR	TOTAL		
Claims as amended - Part II							Ľ	THAN				
(Column 1) (Column 2) (Column 3)						ı	SWALLE	MTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	÷	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIDA]=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
							<u>ا</u> Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	_					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST (BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOS	Total	*	Minus	#0		=		X\$ 9=		OR	X\$18=	
APPOR	Independent	*	Minus	***	T OL 4104]=		X40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
							<u>ا</u> ۵۱	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL 4104	<u> </u>		X40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM .							+135=		OR	+270=	
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL		OR	TOTAL	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

			∜ 1					*				"· •
					•			Ap	plication o	or Do	cket Numt	er
	PATENT A	PPLICATIOI Effecti	N FEE DET ve October	1, 20	INATIO	N RECOR	D —		· 			
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER SMALL E	ENTITY	
TOTAL CLAIMS					fire a			RATE	FEE		RATE	FEE
FOR			NUMBER FIL	ED	NUMBE	R EXTRA	8/	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			i - minu	s 20=	*	Y		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	minu	ıs 3 =	*			X42=		OR	X84=	
	TIPLE DEPEN		RESENT					+140=		OR	+280=	
ا م	be difference	in column 1 is	less than zero, enter "0" in column			olumn 2	L	TOTAL		OR	TOTAL	· · · · · ·
* If the difference in column 1 is less than zero, enter *0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								,	ENTITY	OR	OTHER SMALL	
AMENDMENT A	1	(Column 1) CLAIMS REMAINING AFTER		HIGH NUM PREVI	HEST MBER HOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* AMENDMENT	Minus	PAIC	FOR	=	T	X\$ 9=	1	OR	X\$18=	\
	Independent	. 1	Minus	***	3	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	NULTIPLE DEPENDENT CLAIM			T	+140=	1	OR	+280=	\	
			·				A	TOTAL DDIT. FEE	1	OF	TOTAL	1 t
	•	(Column 1)			umn 2)	(Column 3)	-		1.00/	7		ADDI-
8 4		CLAIMS REMAINING .AFTER	PR	NU PRE\	GHEST JMBER VIOUSLY	PRESENT EXTRA	·	RATE	FEE	OF	PATE	TIONAL FEE
AMENDMENT	Total	AMENDMENT	Minus	##	DFOR	=		X\$ 9=			X\$18=	
S S	Independent	*	Minus	**		=		X42=		O	X84=	
AN	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT CLAIM			1	+140=		OF	+280=		
							L	ATOT			TOTA	
								DDIT. FEI	: L		, .	
101		(Column 1) CLAIMS REMAINING AFTER		HI NI PRE	Humn 2) GHEST UMBER EVIOUSLY	PRESENT EXTRA	11	RATE	ADDI- TIONA FEE		RATE	ADDI- TIONA FEE
ENDMENT	Total	AMENDMENT	Minus	P/	ND FOR	= ->	11	X\$ 9=		7	R X\$18	=
CNU	Independent	4	Minus	***		=		X42=	1	٦٥	R X84	-

Independent

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Development Paid For Trans or Independent in the highest number

OR

+140=

ADDIT. FEE

TOTAL

+280=

OR ADDIT. FEE

TOTAL